

TRANSITION PLAN
CROSS REGION
(Clarke, Decatur, Lucas, Monroe, Ringgold, Wayne counties)

A. LOCAL ACCESS POINTS – Effective Date: 7/1/2014

DESCRIPTION

Areas agencies located in each member county where individuals can apply for mental health and disability services administered by the region.

PROGRESS/STATUS

- The local access points are well established in all counties and are a continuation of the previous access points. See Attachment A
- CROSS applications and training on how to complete and process the application will occur July 2014 thru August 2014.
- During the initial 6 month transition period (July thru December 2014) the previous county CPC applications will be accepted.
- Training on the application completion and referral process will be conducted by the CROSS Care Coordinators at the Access Point sites; other provisions will be made upon request by the Provider.

Training for the local access points on the CROSS Management Plan will commence when the management plan is approved by the state and will be completed within 60 days of said approval.

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B. REGION'S TARGETED CASE MANAGEMENT PROVIDERS FUNDED BY THE MEDICAL ASSISTANCE PROGRAM –EFFECTIVE DATE 7/1/2014

DESCRIPTION

Case Management is a service provided by a case manager who assists individuals in gaining access to needed medical, social, educational, and other services through assessment, development of a care plan, referral, monitoring and follow-up using a strengths-based service approach that helps individuals achieve specific desired outcomes leading to a healthy self-reliance and interdependence with their community.

PROGRESS/STATUS

Two case management agencies have been designated by the CROSS Region for adult targeted case management services:

- 1) Decatur County Community Services : 201 NE Idaho St., Leon, Iowa 50144
Phone: 641-446-7178
- 2) Southeast Iowa Case Management: Satellite office: 103 South Clinton, Albia, Iowa 52531
Phone: 641-932-5697. Home Office: 101 N 16th, PO Box 1103, Fairfield, Iowa 52556
Phone: 641-472-3523.

Designated Case Management agencies are accredited by the Iowa Department of Human Services under Chapter 24 and case managers meet the qualifications as defined in IAC 441.

Enrollees needing case management services will be offered both agencies as a choice of Targeted Case Management services.

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C. SERVICE PROVIDER NETWORK FOR THE REGION – Effective Date: 7/1/2014

DESCRIPTION

Contracts have been signed with providers that provide the CORE services and CORE plus services within the region. A contract with Mary Greely Psychiatric Hospital and memorandums of understanding with two State Mental Health Institutes all of which are within 100 miles of the regions borders will be in place.

PROGRESS/STATUS

See Attachment B (Listing of all the current providers for the CROSS Region)

**D. SERVICE ACCESS AND AUTHORIZATION PROCESS UTILIZED BY THE REGION –
EFFECTIVE DATE: 7/1/2014**

DESCRIPTION

Individuals applying for service funding and access will receive notification within a timely manner. The process and timeline for service access and authorization will be applied consistently throughout the region.

See Attachment C.

PROGRESS/STATUS

- Access begins with an Application for Services.
- An application can be obtained through access points.
- The application will be processed by the CROSS Care Coordinator office in the county in which the Applicant resides. If residency is undetermined the application will be processed by the CROSS Care Coordinator that receives the request.
- The CROSS Care Coordinators will follow the procedure as outlined in attachment C.

**** The Technical Assistance Committee will meet monthly to review the effectiveness of the application, enrollment and notification process and propose any changes. The technical Assistance Committee is made up of each member county's former CPC.**

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E. INFORMATION TECHNOLOGY and DATA MANAGEMENT CAPACITY EMPLOYED BY THE REGION TO SUPPORT REGIONAL FUNCTIONS - EFFECTIVE DATE 7/1/2014

DESCRIPTION

The informational technology to be used by the regional offices to meet the minimum data set requirements as set forth in Iowa Administrative Code 441-25.41 (331). The web based product the region will be using is CSN. CSN has the capacity to exchange information with the department, counties and regions, contractors, and others involved with services to persons with a disability who have authorized access to the central data repository. The information exchanged shall be labeled consistently and share the same definitions.

PROGRESS/STATUS

Each county in the region utilizes the same web based program for budgeting, claims, record management and data collection. The web based product has the ability to record data for each member county and compile regional reports from the member county data.

The data collected on each individual served shall include:

- Demographic Information
- Expenditure data
- Data concerning the services and other support provided to each individual as specified by the department.

Each member county shall provide computers, internet services, phones, printers, scanners and any other technological equipment or supports needed to perform job functions and access the web based product.

CROSS region will utilize the web based product to maintain electronic files on each applicant; no paper files will be maintained by the region. Quality assurance will include monthly chart reviews by the Technical Assistance Committee.

The product's data capacity meets the warehouse data requirements as referenced in Iowa Administrative Code 441-25.41 (331)

Utilization reports will be obtained on a quarterly basis and analyzed by the CEO, Technical Assistance Committee and submitted to the governing board quarterly.

Each CROSS care coordinator will enter the submitted applicant's information from the CROSS region application into web based product. All signed documents will be scanned and uploaded; this includes the following: Releases of information, medical and psychological reports, funding documents, care plans, proof of

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eligibility documents, assessments, reports, notes and any other pertinent documentation related to the applicant and services. The electronic charts meet HIPAA requirements, will be password protected and access shall be limited according to job functions.

All email containing PHI shall be encrypted; each member county will utilize their county's IT staff for technical support of equipment.

F. BUSINESS FUNCTIONS, ACCOUNTING PROCEDURES, AND OTHER ADMINISTRATIVE PROCESSES – EFFECTIVE 7/1/2014

DESCRIPTION

Fiscal Agent- Is the Decatur County Auditor. The Fiscal Agent will manage the risk pool funds and operational expenses associated with the region. All accounts shall be maintained using generally accepted accounting principles.

PROGRESS/STATUS

Budgeting: All member counties utilize the same COA codes; each member county submits a revenue and expense budget to the CEO and Finance Committee. The budgets are reviewed by the Finance Committee any questions or incongruities are addressed by the committee with the member county(ies). The member county budgets are then compiled into one regional budget that will be submitted to the Regional Governing Board for final approval. The counties will enter the approved member county budget into the web based software where claims will be filed against the budget. The budget from the web based product shall be utilized for accrual financial reporting.

Claims: All claims will be submitted to the CROSS Care Coordinator's office that issued the Notice of Service Authorization. The claim will be placed into the web based products software accounting system by the Care Coordinator or designee and submitted to the county auditor's office in the county where the Care Coordinator serves.

The local auditor's office will pay the claim out of the member county's Regional Fund. A monthly report of revenue and expenditures will be submitted to the CEO of the region to compile into a regional report that will be submitted to the Regional Governing Board on a quarterly and annual basis.

The member county regional funds will expense care coordinator salaries, service expenditures and contributions to the risk pool and region administrative costs. The member county will also receive revenues allocated to that county for regional mental health funds, such as equalization funds, etc. The CEO will submit claims for the CROSS administrative funds to the Fiscal Agent.

Administrative costs overseen by the Fiscal agent include the following:

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Contribution to CEO salary, Insurance, HIPAA resources, IT support for web page, Legal fees for the region, supplies, publications, etc.

Audits: The regional accounts shall be audited by the Fiscal Agent's auditing agent and maintained using generally accepted accounting principles. If an irregularity is noted the CEO will contact the involved county's care coordinator and auditor, notify the Governing Board and Finance Committee who will investigate the irregularity. Any illegal activity shall be reported to legal authorities.

Reports: The Care Coordinators and Fiscal Agent will provide a monthly report to the CEO of regional operational and administrative expenditures and revenues that will be included in the quarterly and annual report to the Region's Governing Board. The reports will include accrual and cash accounting. The monthly reports will be reviewed by Technical Assistance and Finance Committees for any irregularities. If an irregularity is noted the CEO will contact the involved county's care coordinator and auditor, notify the Governing Board and Finance Committee who will investigate the irregularity. Any illegal activity shall be reported to legal authorities.

Statistical Reports: Monthly statistical reports will be compiled from the web based charting and accounting system to be compiled into monthly and quarterly reports. The monthly reports will be submitted to the Technical Assistance Committee for review and clarification when needed.

Contracts: CROSS will contract with traditional and non-traditional providers to ensure core services are available within the region. A non-traditional provider may be an individual, organization and/or business who deliver services in the consumer's home and/or other community setting. Non-traditional providers typically are individuals, organizations, or businesses which do not provide MH/ID/DD services as a part of their normal business. **See Attachment F.**

The CROSS Region has a contracting process to initiate with current and new or potential providers of services to assure they meet the accrediting requirements, and are in good standing. The CROSS CEO will perform and maintain a record of the monthly exclusion review with the OIG. All providers will be asked to produce a copy of their licensure, accreditation or certification. All contracts and associated documentation will be kept in a central file located in the office of the Region's CEO.

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G. COMPLY WITH DATA REPORTING AND OTHER INFORMATION TECHNOLOGY REQUIREMENTS IDENTIFIED BY DEPARTMENT - EFFECTIVE DATE - 7/1/2014

DESCRIPTION

The region shall be using CSN for uniform data collection; it has the capacity to exchange information with the department, counties and regions, contractors, and others involved with services to persons with a disability who have authorized access to the central data repository. The information exchanged shall be labeled consistently and share the same definitions.

PROGRESS/STATUS

The data collected on each individual served shall include:

- Demographic Information
- Expenditure data
- Data concerning the services and other support provided to each individual as specified by the department.

REPORTS

The CROSS Region CEO will be responsible for submitting the annual reports; due December 1 of each year and any other requested data and reports to the state.

H. THE DEPARTMENT HAS APPROVED THE REGION'S CHAPTER 28E AGREEMENT – EFFECTIVE DATE 1/27/2014

The CROSS Region's 28E document was signed by all member counties and submitted to the state for approval. The state approved the document and each county filed the 28E agreement through their respective Recorder Offices with the state.

I. THE DEPARTMENT HAS APPROVED THE REGION'S INITIAL DRAFT OF THE REGIONAL TRANSITION PLAN. – 6/30/14 the initial CROSS Transitional plan was submitted.

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ATTACHMENTS

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ATTACHMENT A

Access Points

An access point is a part of the service system or community that shall be trained to complete the MH/DD funding applications for persons with a disability and forward them to the local CROSS Office.

Access Points	Address	Phone Number
CLARKE COUNTY		
Clarke County Courthouse, CROSS Coordinator Office	Clarke County Courthouse 100 S. Main, Osceola, IA 50213	641-414-2968
Crossroads Mental Health	820 N Main, Osceola, IA 50213	641-342-4888
Clarke County Hospital	800 S Fillmore St. Osceola, IA 50213	641-342-2184
Clarke County Public Health	134 W. Jefferson, Osceola, IA 50213	641-342-3724
Decatur/Ringgold/Clarke County Case Management	201 NE Idaho St, Leon, Iowa 50144	641-446-7178
DECATUR COUNTY		
Decatur County Community Services, CROSS CEO, Care Coordinator	201 NE Idaho St., Leon, Iowa 50144	641-446-7178
Community Health Centers of Southern Iowa (2 locations)	See Below	
CHCSI-Leon	302 NE 14 th St., Leon, Iowa 50144	641-446-2383
CHCSI-Lamoni	802 E Ackerley, Lamoni, Iowa 50140	641-784-7911
Decatur County Hospital	1405 NW Church, Leon, Iowa 50144	641-446-4871
Decatur County Public Health	207 NE Idaho St., Leon, Iowa 501044	641-446-6518
Decatur/Ringgold/Clarke County Case Management	201 NE Idaho St, Leon, Iowa 50144	641-446-7178
LUCAS COUNTY		
Lucas County Community Services, CROSS Coordinator Office	125 South Grand Chariton, IA 50049	641-774-0423
Southeast Iowa Case Management	103 South Clinton, Albia, IA 52531	641-932-5697
Lucas County Health Center	1400 N. 7 th , Corydon, IA 50049	641-774-3370
MONROE COUNTY		
Monroe County Community Services, Cross Coordinator Office	1801 South B Street, Albia, Iowa 52531	641-932-2427
Community Health Centers of Southern Iowa	12 Washington Ave West, Albia, Iowa 52531	641-932-2065
Southeast Iowa Case Management	103 South Clinton, Albia, IA 52531	641-932-5697
RINGGOLD COUNTY		
Ringgold County Public Health	119 South Fillmore, Mount Ayr, Iowa 50854	641-464-0691
Decatur/Ringgold County Case Management	201 NE Idaho St, Leon, Iowa 50144	641-446-7178
WAYNE COUNTY		
Wayne County Community Services	101 North Lafayette, Corydon, IA 50060	641-872-1301
Southeast Iowa Case Management	103 South Clinton, Albia, IA 52531	641-932-5697
Community Health Centers of Southern Iowa	215 West State Street, Corydon, IA 50060	641-872-1750
Decatur /Ringgold/Clarke County Case Management	201 NE Idaho Street, Leon, IA 50144	641-446-7178

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Attachment B

PROVIDER NETWORK	
CORE: Outpatient Mental Health Services, Peer Support, Crisis Evaluation, Family Support, Health Homes,	
Community Health Centers of Southern Iowa, Health Home, Peer support, family support, Crisis Evaluation, Outpatient mental health services, medication prescribing and management, twenty-four hour access to crisis response, assessment and evaluation	302 NE 14 th St, Leon, Iowa 50144: Ph: 641-446-2383 802 E Ackerley, Lamoni, Iowa 50140: Ph: 641-784-7911 204 S. Franklin, Corydon, Iowa 50060 (Set appointments through the Leon or Lamoni offices)
Cross Roads: Health Home, Peer support, family support, Crisis Evaluation, Outpatient mental health services, medication prescribing and management, twenty-four hour access to crisis response, assessment and evaluation.	820 N. Main St. #1, Osceola, Iowa 50213 Ph: 641-342-4888
Lucas County Health Center Outpatient mental health services, Crisis Evaluation, medication prescribing and management, assessment and evaluation, family counseling.	1200 N. 7 th St., Chariton, Iowa 50049 Ph: 641-774-3370
CORE: Inpatient mental health treatment Mental Health Institutes and Hospitals	
Clarinda Mental Health Institute	1800 N. 16 th ST., Clarinda, Iowa 51632 Ph: 712-542-2161
Mary Greeley Medical Center	1111 Duff Av e., Ames Iowa 50010 Ph: 515-239-2155
Mount Pleasant Mental Health Institute	1200 E Washington St., Mount Pleasant, IA 52641 Ph: 319-385-7231
CORE: CRISIS INTERVENTION SERVICES	
Community Health Centers of Southern Iowa, 24 hour / 365days- hotline number	302 NE 14 th St, Leon, Iowa 50144: Ph: 641-446-2383 802 E Ackerley, Lamoni, Iowa 50140: Ph: 641-784-7911 204 S. Franklin, Corydon, Iowa 50060 (Set appointments through the

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	Leon or Lamoni offices)
CORE: Day Habilitation, SCL, Home Community Based Services, Respite	
MOSAIC –ID only SCL: hourly and daily, Day Hab	405 East Mc Lane St., Osceola, Iowa 50213
Southern Iowa Resources for Families – Hab, BI, D/D and ID populations SCL: hourly and daily, Respite, Day Habilitation	1605 W 1 st St., Leon, Iowa 50144, Ph: 641-446-6808 103 S. Lafayette St., Corydon, Iowa, 50060 Ph: 641-872-1411
Crest Services – Hab, BI, D/D and ID populations	1221 Brookdale, Chariton, Iowa 50049 Ph: 641-774-5291
Ringgold County Supportive Services - ID Population only Day Habilitation	507 South Henderson Dr, Mount Ayr, IA 50854 641-464-2067
CORE: Case Management	
Decatur County Community Services – Case Management – ID, BI,DD, EW, CMI as they transition to IHH.	201 NE Idaho St., Leon, Iowa 50144 Ph: (641) 446-7178
Southeast Iowa Case Management – ID, BI, CMI as they transition to IHH.	103 South Clinton, Albia, IA , 52531 Ph: 641-932-5697 12 Washington Ave West, Albia, IA 52531. 641-932-2065.
CORE: Employment Services: Job development, prevocational services, supported employment	
MOSAIC – ID only Job development, prevocational services, supported employment	405 East Mc Lane St., Osceola, Iowa 50213 Ph: 641-342-6015
Southern Iowa Resources for Families- ID and Hab, BI, DD Job development, prevocational services, supported employment	1605 W 1 st St., Leon, Iowa 50144 Ph: 641-446-6808 103 S. Lafayette St., Corydon, Iowa 50060 Ph: 641-872-1411
Ragtime – ID, Hab,DD Job development, prevocational services, supported employment	116 North 2 nd Street, Albia, Iowa 52531 Ph: 641-932-7813

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CORE: HOME HEALTH AIDE – Populations: ID,BI,DD, CMI	
Clarke County Public Health	134 W Jefferson St., Osceola, IA 50213 Phone: 641-342-3724
Decatur County Public Health	207 NE Idaho St., Leon, IA 50144 Phone: 641-446-7178
Lucas County Public Health	123 S. Grand, Chariton IA, 50049 b Phone: 641-774-4312
Monroe County Public Health	1801 South B Street, Albia, IA 52531 Phone: 641-932-7191
Ringgold County Public Health	119 S. Fillmore, Mt.Ayr., IA 50854Phone: 641-464-0691
Wayne County Public Health	417 S. East St., Corydon, IA 50060 Phone: 641-872-1167
CORE: Home and Vehicle Modification	
C&J Quality Jobs	610 W Maple St., Corydon, Iowa 50060 Phone: 641-872-3801
Circle of Life Rehabilitation Services	112 West Madison St, Mt Ayr, Iowa 50854 Phone: 641-464-8058
Hammer Medical Supplies	1801 2 nd Ave., Des Moines, IA 50314 Phone: 515-213-2886
CORE: Personal Emergency Response System	
Connect America	One Belmont Avenue, Suite 1205 Bala Cynwyd, PA 19004 President Healthcare Division: Richard Brooks
CORE PLUS: Residential Care Facilities	
Brees Rest Home : ID, CMI, DD	210 Washington Ave. E., Albia, Iowa 52531 Ph: 641-932-5517
New Venture : ID, DD	401 S. Washington, Corydon, Iowa 52531 Ph: 641-872-1524
Ringgold County Group Home: ID only	111 Ringgold St., Mt.Ayr, Iowa 50854 Phone: 641-464-2871

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Attachment C

Service Access and Authorization Timeline			
Action	PROCESS	Required Documents	Time Frame
Eligibility	<p>A completed CROSS Application with the following information: Proof of Age Proof that the applicant is a legal resident of Iowa.</p> <p>Meets Income and Resource Guidelines</p> <p>Diagnostic Eligibility</p>	<p>Birth Certificate or Social Security Card or Iowa Drivers License or Iowa ID or Rental Agreement or release to speak with landlord or Title XIX card.</p> <p>Pay stub, Income Tax Return, or other benefits received private or public or release to speak with employer etc.</p> <p>Provide releases of information so the Care Coordinator may access medical and psychiatric records or provide such records to the Care Coordinator</p>	Eligibility is determined within 10 working days of receipt of application in the CROSS care coordinator's office.
Notice of Enrollment or Denial.	<p>Notice of Enrollment will be sent informing the applicant he/she has been accepted for funding by the region and information to schedule the standardized assessment.</p> <p>Notice of Denial: - will be sent with information to appeal.</p>	<p>See attachment D</p> <p>See Attachment E</p>	Sent within 5 working days of eligibility determination.
Development of individualized Plan	Care Coordinator will set up an appointment with the Enrollee to develop an initial Individualized Plan of Care (IPC). The purpose of the IPC is to set up initial services to meet immediate needs and will be modified as	IPC Plan	Held within 10 working days of the Notice of Enrollment

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	needed after the Standardized assessment.		
Standardized Assessment	SIS assessment for ID population Other populations yet to be determined.	Notification of the Assessment is sent with the Notice of Enrollment.	Completed within 90 days of Notice of Enrollment
Initiation of Services	Notice of Service Authorization	See attachment E	Sent within 5 working days of the IPC.
*** In emergent circumstances the application process can be expedited by the Exception to Policy Procedure to avoid any detriment to the applicant and will not exceed 10 days****			

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Attachment D – Enrollment Form

Date: _____

Name: _____

Address: _____

Your completed application has been processed. According to the information received the following determination was made:

☐ Meet Eligibility

Please schedule an appointment for the standardized assessment within 90 days from the date this notice was mailed. You can make an appointment by contacting the agency below:

Place information here when available.

If you need assistance or have any difficulty making the appointment; please contact your Care Coordinator in the county that you filed your application. Once you receive a date and time for your appointment; please notify the coordinator in the county where you filed.
(see contact information below)

If you disagree with this decision you may appeal by following the appeal procedure on the back of this form.

100 S Main, Osceola, IA 50213
Ph: 641-414-2968 Fax: 641-446-1592
Email: clarkecountymentalhealth@gmail.com

125 S. Grand, Chariton, Iowa 50049
Ph: 641-774-0423 Fax: 641-774-4383
Email: egbertk@lucasco.org

201 NE Idaho Street, Leon, IA 50144
Ph: 641-446-7178 Fax: 641-446-8208
Email: deccpcc@decccs.org

1801 S.B. Street Albia, IA 52531
Ph: 641-932-2427 Fax: 641-932-2578
Email: kfisher@monroecoia.us

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119 S. Fillmore, Mount Ayr, Iowa 50854
Ph: 641-464-0691 Fax: 641-464-2476
Email: bfletchall@rcph.net

101 N. Lafayette, Box 435, Corydon, IA 50060
Ph: 641-872-1301 Fax: 641-872-2843
Email: waynecpc@grm.net

Back Page of Enrollment Form

. Appeals Processes (IAC 441-25.21) (1)

Non Expedited Appeal Process (IAC 441-25.210) (1) (I.1)

Individuals, families, individual representatives (with the consent of the individual), and providers may appeal the decisions of the region or any of its designees or contractors at any time. Such individuals or organizations may also file a grievance about the actions or behavior of a party associated with the regionally managed system of care at any time.

Written appeal forms, with a clear description of the appeals, investigation, and disposition process, and the telephone number for submitting a verbal appeal or grievance shall be attached to the Notice of Decision form. The appeal form will also be available in each member county's community services office or online at the CROSS website. Assistance in completing the appeal form shall be provided upon request by CROSS staff.

How to Appeal

To appeal, a completed appeal form must be sent to the CROSS Office that the Notice of Decision was received from (see table below) within ten (10) working days of receipt of the Notice of Decision.

LOCAL COUNTY COMMUNITY SERVICES OFFICES

COUNTY OFFICE	ADDRESS	PHONE , FAX, EMAIL
Clarke County Social Services	100 S. Main, Osceola, Iowa Clarke County Courthouse	Ph: 641-414-2968 Fax: 641-446-1592 Email: clarkecountymentalhealth@gmail.com
Decatur County Community Services	201 NE Idaho ST, Leon , Iowa 50144	Ph: 641-446-7178 Fax: 641-446-8208 Email: deccpc@decccs.org
Lucas County Community Services	125 S. Grand, Chariton, Iowa 50049	Ph: 641-774-0423 Fax: 641-774-4383 Email: egbertk@lucasco.org
Monroe County Community Services	1801 S. B St. , Albia, Iowa 52531	Ph: 641-932-2427 Fax: 641-932-2578 Email: kfisher@monroecoia.us
Ringgold County Public Health	119 South Fillmore, Mount Ayr, Iowa 50854	Ph: 641-464-0691 Fax: 641-464-2476 Email: bfletchall@rcph.net
Wayne County Community Services	101 N. Lafayette, Corydon, Iowa 50060 Mail: Box 435, Courthouse, Corydon, Iowa 50060	Ph: 641-872-1301 Fax: 641-872-2843 Email: waynecpc@grm.net

Reconsideration - The Service Coordinator located in the member county that issued the Notice of Decision and one member of the TAC committee shall review appeals and grievances. After reviewing an appeal, the Service Coordinator shall contact the appellant not more than five (5) working days after the written appeal is received. The Service Coordinator shall collect additional information from the appellant and other sources, if necessary and consent is given. Following a review of additional information and all relevant facts, a written decision shall be issued no later than five (5) working days following the contact with the appellant. A copy of the decision shall be sent to the appellant and/or representative by regular mail.

Final Review -

If a resolution is not agreed upon through Reconsideration process, then the appellant can pursue a hearing through a state Administrative Law Judge (ALJ). The decision of the state ALJ shall be the final decision.

The County Rural Offices of Social Services shall not pay legal fees for an appellant. If you cannot afford legal representation, you may contact Legal Services of Iowa at 1-800-532-1275 or <http://www.iowalegalaid.org/>

Expedited Appeals Process (IAC 441-25.21(1)(I.2))

This appeals process shall be performed by a mental health professional who is either the Administrator of the Division of Mental Health and Disability Services of the Iowa Department of Human Services or the Administrator's designee. The process is to be used when the decision of County Rural Offices of Social Services concerning an individual varies from the type and amount of service identified to be necessary for the individual in a clinical determination made by a mental health professional, and the mental health professional believes that the failure to provide the type and amount of service identified could cause an immediate danger to the individual's health and safety.

How to Appeal

The mental health professional shall use the written appeal forms that will be attached to the Notice of Decision form or may obtain a form from the CROSS social services office located in the county where the Individual resides or from the CROSS website. The forms shall be sent to:

Department of Human Services - MHDS Division
Hoover State Office Building, 5th Floor
1305 E Walnut, Des Moines, IA 50319

- The appeal shall be filed within 5 days of receiving the notice of decision by County Rural Offices of Social Services. The expedited review, by the Division Administrator or designee, shall take place within 2 days of receiving the request, unless more information is needed. There is an extension of 2 days from the time the new information is received
- The Administrator shall issue an order, including a brief statement of findings of fact, conclusions of law, and policy reasons for the order, to justify the decision made concerning the expedited review. If the decision concurs with the contention that there is an immediate danger to the individual's health or safety, the order shall identify the type and amount of service, which shall be provided for the individual. The Administrator or designee shall give such

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notice as is practicable to individuals who are required to comply with the order. The order is effective when issued.

3. The decision of the Administrator or designee shall be considered a final agency action and is subject to judicial review in accordance with section 17A.19.

The County Rural Offices of Social Services shall not pay legal fees for an appellant. If you cannot afford legal representation, you may contact Legal Services of Iowa at 1-800-532-1275 or <http://www.iowalegalaid.org/>

Attachment E – Notice of Denial

Date: _____

Name: _____

Address: _____

Dear Applicant:

I am sorry to inform you that after reviewing your application you do not meet the eligibility criteria for CROSS Region Mental Health Funding due to the following reason(s). Please see the checked boxes and explanation below.

Eligibility Criteria		Reason for Denial
<input type="checkbox"/>	Incomplete Information	
<input type="checkbox"/>	Residency – State or Region	Not a Resident of Iowa Not a resident of the CROSS Region
<input type="checkbox"/>	Income	Over Income Guidelines
<input type="checkbox"/>	Resources	Over Resource Guidelines
<input type="checkbox"/>	Diagnostic	Did not meet diagnostic criteria

Explanation:

Referral:

If you disagree with this decision you may appeal buy following the appeal procedure on the back of this form.

100 S Main, Osceola, IA 50213
Ph: 641-414-2968 Fax: 641-446-1592
Email: clarkecountymentalhealth@gmail.com

125 S. Grand, Chariton, Iowa 50049

201 NE Idaho Street, Leon, IA 50144
Ph: 641-446-7178 Fax: 641-446-8208
Email: deccpcc@decccs.org

1801 S.B. Street Albia, IA 52531

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Ph: 641-774-0423 Fax: 641-774-4383

Email: egbertk@lucasco.org

Ph: 641-932-2427 Fax: 641-932-2578

Email: kfisher@monroecoia.us

119 S. Fillmore, Mount Ayr, Iowa 50854

Ph: 641-464-0691 Fax: 641-464-2476

Email: bfletchall@rcph.net

101 N. Lafayette, Box 435, Corydon, IA 50060

Ph: 641-872-1301 Fax: 641-872-2843

Email: waynecpc@grm.net

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G. Appeals Processes (IAC 441-25.21) (1)

Non Expedited Appeal Process (IAC 441-25.210) (1) (L)(1)

Individuals, families, individual representatives (with the consent of the individual), and providers may appeal the decisions of the region or any of its designees or contractors at any time. Such individuals or organizations may also file a grievance about the actions or behavior of a party associated with the regionally managed system of care at any time.

Written appeal forms, with a clear description of the appeals, investigation, and disposition process, and the telephone number for submitting a verbal appeal or grievance shall be attached to the Notice of Decision form. The appeal form will also be available in each member county's community services office or online at the CROSS website. Assistance in completing the appeal form shall be provided upon request by CROSS staff.

How to Appeal

To appeal, a completed appeal form must be sent to the CROSS Office that the Notice of Decision was received from (see table below) within ten (10) working days of receipt of the Notice of Decision.

LOCAL COUNTY COMMUNITY SERVICES OFFICES

COUNTY OFFICE	ADDRESS	PHONE, FAX, EMAIL
Clarke County Social Services	100 S. Main, Osceola, Iowa Clarke County Courthouse	Ph: 641-414-2968 Fax: 641-446-1592 Email: clarkecountymentalhealth@gmail.com
Decatur County Community Services	201 NE Idaho ST, Leon, Iowa 50144	Ph: 641-446-7178 Fax: 641-446-8208 Email: deccpcc@decccs.org
Lucas County Community Services	125 S. Grand, Chariton, Iowa 50049	Ph: 641-774-0423 Fax: 641-774-4383 Email: egbertk@lucasco.org
Monroe County Community Services	1801 S. B St., Albia, Iowa 52531	Ph: 641-932-2427 Fax: 641-932-2578 Email: kfisher@monroecoia.us
Ringgold County Public Health	119 South Fillmore, Mount Ayr, Iowa 50854	Ph: 641-464-0691 Fax: 641-464-2476 Email: bfletchall@rcph.net
Wayne County Community Services	101 N. Lafayette, Corydon, Iowa 50060 Mail: Box 435, Courthouse, Corydon, Iowa 50060	Ph: 641-872-1301 Fax: 641-872-2843 Email: waynecpc@grm.net

Reconsideration - The Service Coordinator located in the member county that issued the Notice of Decision and one member of the TAC committee shall review appeals and grievances. After reviewing an appeal, the Service Coordinator shall contact the appellant not more than five (5) working days after the written appeal is received. The Service Coordinator shall collect additional information from the appellant and other sources, if necessary and consent is given. Following a review of additional information and all relevant facts, a written decision shall be issued no later than five (5) working days following the contact with the appellant. A copy of the decision shall be sent to the appellant and/or representative by regular mail.

Final Review -

If a resolution is not agreed upon through Reconsideration process, then the appellant can pursue a hearing through a state Administrative Law Judge (ALJ). The decision of the state ALJ shall be the final decision.

The County Rural Offices of Social Services shall not pay legal fees for an appellant. If you cannot afford legal representation, you may contact Legal Services of Iowa at 1-800-532-1275 or <http://www.iowalegalaid.org/>

Expedited Appeals Process (IAC 441-25.21(1)(L.2))

This appeals process shall be performed by a mental health professional who is either the Administrator of the Division of Mental Health and Disability Services of the Iowa Department of Human Services or the Administrator's designee. The process is to be used when the decision of County Rural Offices of Social Services concerning an individual varies from the type and amount of service identified to be necessary for the individual in a clinical determination made by a mental health professional, and the mental health professional believes that the failure to provide the type and amount of service identified could cause an immediate danger to the individual's health and safety.

How to Appeal

The mental health professional shall use the written appeal forms that will be attached to the Notice of Decision form or may obtain a form from the CROSS social services office located in the county where the Individual resides or from the CROSS website. The forms shall be sent to:

Department of Human Services - MHDS Division
Hoover State Office Building, 5th Floor
1305 E Walnut, Des Moines, IA 50319

4. The appeal shall be filed within 5 days of receiving the notice of decision by County Rural Offices of Social Services. The expedited review, by the Division Administrator or designee, shall take place within 2 days of receiving the request, unless more information is needed. There is an extension of 2 days from the time the new information is received
5. The Administrator shall issue an order, including a brief statement of findings of fact, conclusions of law, and policy reasons for the order, to justify the decision made concerning the expedited review. If the decision concurs with the contention that there is an immediate danger to the individual's health or safety, the order shall identify the type and amount of service, which shall be provided for the individual. The Administrator or designee shall give such notice as is practicable to individuals who are required to comply with the order. The order is effective when issued.
6. The decision of the Administrator or designee shall be considered a final agency action and is subject to judicial review in accordance with section 17A.19.

The County Rural Offices of Social Services shall not pay legal fees for an appellant. If you cannot afford legal representation, you may contact Legal Services of Iowa at 1-800-532-1275 or <http://www.iowalegalaid.org/>

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Attachment F

Non-Traditional Provider

A non-traditional provider may be an individual, organization and/or business who delivers services in the consumer's home and/or other community setting. Non-traditional providers typically are individuals, organizations, or businesses which do not provide MH/ID/DD services as a part of their normal business. These services are not to provide treatment but are supportive and may be rehabilitative in focus, and are initiated when there is a reasonable likelihood that such services will benefit the consumer's functioning, assist them in maintaining community tenure, and act as an alternative way to achieve the consumer's stated goals or outcomes. A request for funding can be made by any consumer, or the consumer's authorized representative, to utilize non-traditional providers for services as approved in the CROSS Regional Management Plan. Non-traditional providers may be subject to certain licensing, certification, accreditation or other state approval standards.

Criteria for Selecting a Non-Traditional Provider

- ☐ The service outcome(s) achieved by the non-traditional provider, as identified by the consumer, must be comparable to services provided by traditional licensed providers.
 - ☐ Any non-traditional provider who is expected to work directly with consumers having residency in the CROSS Region will be subjected to the following checks paid by CROSS Region:
 - ☐ A check of the criminal registry
 - ☐ A check of the sexual predators registry
 - ☐ A check of the child abuse/dependent adult abuse registry
 - ☐ The CROSS care coordinator will fund only if the Department of Human Services approves the hiring of the individual based on the registry information.
 - ☐ Any non-traditional provider who works directly with CROSS Region consumers may be required to pass a drug-screening test and a communicable disease test as conducted by a medical doctor.
 - The applicant is responsible for payment of these tests.
 - ☐ The applicant shall provide evidence of applicable insurance (including liability insurance), and the mental/physical abilities or other qualifications needed to perform the service (e.g.: a driver's license, or the ability to lift, or the ability to read medication labels, etc.)
 - ☐ Providers of licensed services must be licensed.
-

Process for Approving a Non-traditional Provider

- ☐ The applicant (individual, organization or business) will submit a proposal addressing the following information:
 - ☐ Personal or organizational information (values statement/mission statement)
 - ☐ Description of their experience working with individuals with disabilities
 - ☐ Training and previous experience in providing the service the consumer needs
 - ☐ Description of services to be provided
 - ☐ Frequency and duration of services
 - ☐ Description of the skills that qualify them to be a provider
 - ☐ Provision of transportation if applicable
 - ☐ Three references that can provide information on the applicant's experience in job situations similar to the service needs of the consumer
 - ☐ Cost per unit breakdown
- ☐ Prior to being accepted as a non-traditional provider, the applicant will meet with, and be screened by, the Care Coordinator.
- ☐ The Care Coordinator (or designee) will check:

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☐ The registries mentioned above

☐ References

☐ Review evidence of applicable insurance, licenses, and/or any other qualifications required

Plan for Continuous Quality Improvement

☐ The consumer (or authorized representative) and the Care Coordinator (or designee) shall agree to monitoring (type, frequency and duration) the performance and quality of services conducted.

☐ ~~Quality Assurance~~ assessments will be made by the Care Coordinator in the same manner as with traditional providers.

Process for Reimbursement of Services

☐ The applicant shall be informed of and comply with all rules for rate setting and reimbursement as stated in the CROSS Region Management Plan.

☐ Verification of and payment for services will be individually arranged between the Care Coordinator, the consumer and the non-traditional provider through a voucher mechanism.

☐ The Care Coordinator shall make the decision on funding all requests for non-traditional providers, subject to the appeals process.

☐ Services that can be funded by another funding source, such as Medicaid, are not eligible for this program. ~~County funding is the payer of last resort.~~

Statement of Confidentiality and Non-traditional Provider Agreement

☐ The applicant will be asked to sign a statement of confidentiality and will hold in the strictest confidence all information provided to them and will not disclose the information unless authorized pursuant to Chapter 228 of the Iowa Code.

☐ The applicant will be asked to sign a three-way Non-Traditional Provider Agreement between the consumer, CROSS Region, and the non-traditional provider.

☐ Any variations from the standard agreement will be reviewed by the County's Attorney's Office of the Care Coordinator processing the application.

The CROSS Technical Assistance Committee will review the request for funding of an out-of-plan provider and will make a recommendation to the CROSS Region Governing Board to authorize funding. The time frame of this process is dependent upon receiving a complete application, the results of the background check and the approval of the CROSS Region Governing Board.

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Board Officers:

CROSS GOVERNING BOARD

Title	Designation	Name	Phone	e-mail	County
Chair	BOS - Wayne Co.	Duffy Kester	641-873-6683	dkester@grm.net	Wayne
Vice-Chair	BOS -Lucas Co.	Dennis Smith	641-203-0435	smithfarms2@hotmail.com	Lucas
Member	BOS -Ringgold Co.	Dave Inloes	641-414-0218	dinloes@iowatelecom.net	Ringgold
Member	BOS - Clarke Co.	Marvin McCann	641-223-3415	mkmccann@iowatelecom.net	Clarke
Member	BOS - Decatur Co.	Jim Fulton	641-784-7353	sheilac@grm.net	Decatur
Member	BOS - Monroe	Denny Ryan	641-799-3861	supervisors@monroeco.ia.us	Monroe
ex-officio - member	Provider	Pete Brantner	641-782-8457	petebrantner@crossroadscreston.com	Clarke
ex-officio - member	Family Member	Anetta Kline	641-203-8366	lucas_monroefds@scicap.org	Lucas